Charitta Burt National Stage Processing Paralegal Specialist

(703) 305-3734

Application or Docket Number

Effective November 10, 1998													119	
CLAIMS AS FILED - PART I (Column 2)										T E	NTITY	OR	OTHER SMALL	
FOR			NUMBER FILED			NUMBER EXTRA			RATE		FEE		RATE	FEE
BASIC FEE										٦		OR		840
TOTAL CLAIMS			/3 minus 20= *					W	X\$ 9	_		YY.	X\$18=	
INDEPENDENT CLAIMS			3 minus 3 =			•		165	X39=			OH GLA	X78=	
MULTIPLE DEPENDENT CLAIM PRESENT								-		34 34	+260=			
* If the difference in column 1 is less than zero, enter "0" in column 2							וטוי	+130:	-			TOTAL	3110	
										<u>ا</u> ا		OR		841)
CLAIMS AS AMENDED - PART II (Column 1) (Column 2) (Column 3									SMAL	TE	NTITY	OR	OTHER SMALL	
AMENDMENT A	a	REM A	AIMS WINING FTER NOMENT		PI	HIGHEST NUMBER REVIOUSLY PAID FOR	PRESENT EXTRA		RATE		ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	23	Minus	•••	20	-3		X\$ 9:	-		OR	X\$18=	54
E E	Independent		8	Minus	**		5		X39=			OR	X78=	420
<u> </u>	FIRST PRESE	NTATIO	ON OF MU	JLTIPLE DEF	PEN	DENT CLAIM		1	+130=			OR	+260=	, , , ,
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l									TOT	ᄱ		~p`	TOTAL	474
		(0a)	l		10	Columb 2\	(Column 3)		TOT ADDIT. F			OR	TOTAL ADDIT. FEE	474
18	<u> </u>	REM	lumn 1) LAIMS MAINING			Column 2) HIGHEST NUMBER REVIOLISIY	(Column 3)			EE	ADDI- TIONAL	OR		474 ADDI- TIONAL
WENT B		REM	LAIMS		P	HIGHEST			ADDIT. F	EE		OR	RATE	ADDI-
ENDMENT B	Total	REM	LAIMS MAINING FTER	Minus	P	HIGHEST NUMBER REVIOUSLY PAID FOR	PRESENT EXTRA		ADDIT. F	EEL	TIONAL	OR	ADOIT. FEE	ADDI- TIONAL
AMENDMENT B	Independent	CI REM A AMEI	LAIMS AAINING FTER NDMENT	Minus	P 410	HIGHEST NUMBER REVIOUSLY PAID FOR	PRESENT EXTRA		RATE	EE L	TIONAL		RATE	ADDI- TIONAL
AMENDMENT B		CI REM A AMEI	LAIMS AAINING FTER NDMENT	Minus	P 410	HIGHEST NUMBER REVIOUSLY PAID FOR	PRESENT EXTRA		RATE	=	TIONAL	OR	RATE X\$18=	ADDI- TIONAL
AMENDMENT B	Independent	CI REM A AMEI	LAIMS AAINING FTER NDMENT	Minus	P 410	HIGHEST NUMBER REVIOUSLY PAID FOR	PRESENT EXTRA		X\$ 9: +130	= = =	TIONAL	OR OR OR	RATE X\$18= X78= +260=	ADDI- TIONAL FEE
AMENDMENT B	Independent	CI REM A AME	LAIMS MAINING FTER NOMENT ON OF MU	Minus	P 44	HIGHEST NUMBER REVIOUSLY PAID FOR	PRESENT EXTRA		RATE X\$ 9: X39:	= = =	TIONAL	OR OR OR	RATE X\$18= X78=	ADDI- TIONAL FEE
C AMENDMENT	Independent	CCO REM AME * * * * * * * * * * * * * * * * * * *	LAIMS AAINING FTER NDMENT	Minus	PEN	HIGHEST NUMBER REVIOUSLY PAID FOR DENT CLAIM	PRESENT EXTRA		X\$ 9: +130	= = TAL	ADDI- TIONAL	OR OR OR	RATE X\$18= X78= +260=	ADDI- TIONAL FEE
C AMENDMENT	Independent	CCO REM AME * * * * * * * * * * * * * * * * * * *	ALIMS ALINING FTER NOMENT ON OF MU LAIMS MAINING VETER	Minus	PEN	HIGHEST NUMBER REVIOUSLY PAID FOR DENT CLAIM Column 2) HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA		RATE X\$ 9: X39: +130 TOTADOIT. F	EE TAL	TIONAL FEE	OR OR OR	RATE X\$18= X78= +260= TOTAL ADOIT. FEE	ADDI- TIONAL FEE
C AMENDMENT	Independent FIRST PRESE	CCO CC CC REM AME	ALIMS ALINING FTER NOMENT ON OF MU LAIMS MAINING VETER	Minus ULTIPLE DE	PEN	HIGHEST NUMBER REVIOUSLY PAID FOR DENT CLAIM Column 2) HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA (Column 3 PRESENT EXTRA		RATE X\$ 9 X39 +130 TO ADDIT. F	EE EE	ADDI- TIONAL	OR OR OR	RATE X\$18= X78= +260= TOTAL ADOIT. FEE RATE X\$18=	ADDI- TIONAL FEE
AMENDMENT	Independent FIRST PRESE	CCO CC REM AME	LAIMS MAINING FTER NOMENT ON OF MU LAIMS MAINING VETER NOMENT	Minus ULTIPLE DE	PPEN	Column 2) HIGHEST NUMBER REVIOUSLY PAID FOR Column 2) HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA (Column 3 PRESENT EXTRA		RATE X\$ 9: +130 ADDIT. F RATE X\$ 9 X39: PATO	EE EE	ADDI- TIONAL	OR OR OR	RATE X\$18= X78= +260= TOTAL ADOIT. FEE X\$18= X78=	ADDI- TIONAL FEE
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